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## BIB DATA SHEET

CONFIRMATION NO. 2190

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
09/831,935	05/15/2001	380	2132	100/02232		
<b>RULE</b>						
<b>APPLICANTS</b> Alon Atsmon, Yehud, ISRAEL;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB99/02110 11/16/1999 which claims benefit of 60/115,231 01/08/1999 and claims benefit of 60/122,687 03/03/1999 and claims benefit of 60/145,342 07/23/1999 and claims benefit of 60/153,858 09/14/1999 This application 09/831,935 05/15/2001 is a CIP of PCT/IL99/00506 09/16/1999 and is a CIP of PCT/IL99/00470 08/27/1999						
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 127072 11/16/1998 ISRAEL 127569 12/14/1998						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 07/19/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/Samson Lemmal/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> PRISI P.O. Box 16446 Arlington, VA 22215 UNITED STATES						
<b>TITLE</b> PERSONAL COMMUNICATOR AUTHENTICATION						
<b>FILING FEE RECEIVED</b> 77	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		